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ABSTRACT

This booklet focuses on establishing effective, meaningful, and forceful programs to prevent alcohol and other drug use by youth between the ages of 10 and 14. It looks at some of the most common developmental characteristics of this age group, and reviews the literature on how best to approach them with prevention messages. The focus is on marketing concepts that will reach young adolescents, and provide them with the information and skills they need to make wise decisions. The booklet is divided into four sections. The first section discusses characteristics and "normal" behavior in this age group. Issues such as risk-taking, super-sensitivity, feelings, physical growth, learning, values, and traits common in young adolescents are examined. The second section discusses risks associated with teenage alconol and other drug use. Knowledge, attitudes, and practices of adolescents regarding alcohol and other drugs are explored. Information is presented from focus groups regarding how to present anti-alcohol and other drug programs to early adolescent youngsters. The third section addresses the concept of getting the message across to young people. Issues such as interpersonal communication, target audience, selecting the message medium, and message appeal are presented. The fourth section presents a framework for planning, developing, and promoting messages and materials for youth. Planning and strategy development, concept development, message development, promotion and distribution, evaluation, and feedback are presented as steps that constitute an ideal process. (LLL)

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YOUNG TEENS:

ABOUT ALCOHOL OTHER DRUGS

CG024065

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service
Alcohol, Drug Abuse, and Mental Health Administration

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YOUNG TEENS:

WHO THEY ARE AND HOW TO COMMUNICATE WITH THEM ABOUT

ALCOHOL & OTHER DRUGS

Alcohol, Drug Abuse, and Mental Health Administration
Public Health Service
U.S. Department of Health and Human Services

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PREFACE

Welcome!

We are glad that you will be joining your colleagues—in your community and across the country—in trying to establish effective, meaningful, and forceful programs to prevent alcohol and other drug use by youth. Because you are with the youngsters—in the schools, churches, community organizations, and helping professions—you know that this must be a collective effort. Because we care about our children and our communities so deeply, we have to find ways to work together to create support for those who are so vulnerable in these complex and changing times.

This booklet focuses on youngsters between the ages of 10 and 14. These are sometimes referred to as "the middle years" and are a time of great growth and opportunity. We will look at some of the most common developmental characteristics of boys and girls of this age and will review some of the growing literature on how best to approach them with our prevention messages.

We are not going to go into detail about the dangers of alcohol and other drug use by youth. The frightening statistics are in every daily newspaper and are well known to most adults. We will focus, instead, on **marketing** concepts that will reach the youngsters with whom we work and that will provide them with the information and skills they need to make wise decisions and to grow up in healthy ways in a world of challenges.

To do this most effectively, we must realize that we are all partners in a community of caring, and we must model responsible, nurturing behavior that will ensure the healthy development of all of our youngsters. We must involve and value the contributions of the entire community in this effort. The stewardship of our fragile constituency involves decisions that are not made in a vacuum; our institutions are all enmeshed with each other. Collaboration among community agencies is necessary if we are to truly effect positive change with our limited resources in money, staff, and time.

In 1630, John Winthrop, first Governor of the Massachusetts Bay Colony, wrote,

> We must delight in each other, make others' conditions our own; rejoice together, labor and suffer together, always having before our eyes our community as members of the same body.

As partners, we all share in the responsibility for our children. We can provide leadership in developing attitudes of work, self-esteem, societal accountability, and personal achievement among our teens while we work with other agencies and institutions toward common goals.

Our communities risk losing the value of an educated, contributing citizenry unless the needs of **all** children and youth are addressed through coordinated programs of appropriate services and resources. Together, local, State, and Federal resources can make the difference. Our hope is that this booklet will help those of you who are on the front lines with our next generation of leaders.

Elaine M. Johnson, Ph.D.
Director
Office for Substance Abuse Prevention

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WHO ARE WE TALKING ABOUT?

They are wonderful and they are difficult to be with. They are frightened and they are self-confident. They live in a rapidly changing world and are bombarded daily by conflicting messages from the media, the streets, and their friends.

They are at a time in their lives when they have certain developmental tasks that must be accomplished. They are "the kids in the middle," a most difficult position.

Alcohol and other drugs are facts of life in most American communities. None of our children are immune to the daily marketing of alcohol and other drugs as panaceas for all our problems. It is difficult for them to understand the difference between legal, acceptable behavior for adults and dangerous behavior for youngsters. They are struggling to emulate what they consider to be adult behavior. They no longer feel like little kids; they want to model their actions on those of their heroes—parents, teachers, athletes, entertainers, and people who are treated with respect in their community. If we don't model the kind of behavior we want to see in our youngsters, we may be providing them with a deadly legacy.

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Youth Isn't Kid Stuff These Days

Youngsters' world is fraught with peril. They make their own rules in a milieu of single-parent households, early sex, gangs, drugs and overburdened schools.

For children now, living with single parents, stepparents or guardians is the rule rather than the exception. Today, it is common for youngsters to be home alone while parents work, common to attend schools where boredom and fear replace promise and pride.

Childhood today can mean making your own rules and depending on those your own age—in a world of early sex and drive-by shootings, of gangs and television ads begging you to "Just Say No" when your parents may already have said "yes."

And, those who pay close attention to the lives of American youngsters warn, childhood has changed for everybody's kids—city kids, rural kids, poor kids, affluent kids, and kids of every race.

Ron Harris
Los Angeles Times
May 12, 1991

The function of any materials OSAP produces is to communicate with these youngsters. We should not be afraid to state our values, and we must know where we stand. Children very easily and very quickly realize when they are receiving mixed messages. It is much easier for them to know what we adults believe is right and wrong through our words and our actions; if we waiver in our convictions or appear unsure of our values, they will distrust our words.

Also remember that our clients are children. Although legislators, parents, other community professionals, the clergy, and local businesses may be our partners as we produce materials, what is written must be accepted by and understood by the primary audience—children between the ages of 10 and 14.

What Are the Characteristics of These Youngsters?

They are about the most active, rambunctious, loving, self-absorbed, scared, and scary group of kids around. They love to eat your food but complain about your cooking. They crave your attention yet complain that you are watching them too closely. They tell you terrible jokes then criticize your sense of humor. If their hair is straight, they want it curly; if they are short, they want to be tall; if they are tall, they complain that they are not like the other children. One day they eat anything they can find and the next day they complain about their school's pizza, your chicken, and the way everything in the refrigerator "tastes funny." They must have a certain shirt or pair of shoes, and—after parents have struggled to find a way to purchase these items—they may abandon them in the lunchroom, at the corner store, or under the bed.

What a dilemma! No matter what happens with these young adolescents, something is always wrong. The loving, responsive, responsible youngster we knew only a few years ago has turned into this moody, forgetful, irresponsible, impolite, loud dynamo who eats our food, dominates our telephone, requires more of a wardrobe than anyone else in the family, demands our constant attention, and also insists on being left alone.

What Is "Normal" Behavior in This Age Group?

Many of the contradictions, contrasts, and conflicts we see in our young teens and preteens are quite normal.

As they grow, they are experiencing changes on all fronts—in the way they learn, feel, look, and deal with other people. These major changes, along with the pressures of today's society, place most early adolescents under a great deal of stress.

There is no "typical" early adolescent—every child is an individual with strengths, weaknesses, and attractive and irritating qualities—but be aware of these common traits:

Young teens are self-absorbed. It is important for them to find out who they are and what they can do, apart from their families. Although they are most interested in themselves, they are also very occupied with their friends and vulnerable to pressure from the group. A delicate balance must be struck between honoring the importance of their friends and asserting our adult responsibilities. In other words, we must acknowledge that their friends are truly important, but make certain that we do not allow their friends to control their behavior or ours.

Parents of young adolescents worry that their children will reject family moral and social values, as they question everything from religion to table manners. This fear is especially strong among families new to this country. Parents see their children living by one set of standards at home and another at school and with their friends, which may cause conflicts at home and at school. The child from a different culture has a doubly hard time developing a personal identity and meeting expectations of parents, teachers, and the community.

A 12-year-old remarked, "I would like to be able to fly if everyone else did; otherwise, it would be rather conspicuous." What a shame: she would rather not fly than stand out from her crowd. To this age group, everything would be just fine if only they had the right clothes, hairstyle, and talent. They still have individuality, but they must not be separated too far from the crowd. In time, they will value individuality and recognize personal accomplishment. For the moment, however, **to be different is difficult.**

The high-energy/low-energy cycle. Early adolescents have a great deal of physical and emotional energy and are capable of being very productive. But they also have periods of unproductive behavior as far as adults can tell. They may

lounge around for hours listening to music, sulk in their bedrooms, or "hang out" with their friends doing nothing.

Sometimes these youngsters seem to be almost frantic. Adults may fear their high energy level. On the other hand, adults resent the "laziness" that they see and urge their youngsters to do something. To the adult, the youngster's behavior is out of line. To the young adolescent, it feels as though "nothing I do is right."

Risk taking. This is a time in their lives when they feel almost immortal. Although they worry about what their friends think about them and about who is going to say what about them at the cafeteria table, they don't believe that they are physically in much danger in the world. We know better and worry a lot about their physical safety.

> Even in the nation's elementary schools, at an age normally associated with innocence, death is very real. In 1988, the latest year for which there are figures, homicide ranks fourth as the cause of death for children under age 14, and homicide is the leading cause of death by injury for those under age 1.
>
> *Ron Harris*
> *Los Angeles Times*
> *May 13, 1991*

Because one of their growing-up tasks is to become individuals, separate from their families, they often become involved in risk-taking behavior. This behavior may get them into trouble, but it also may help them learn to face the world as mature adults. Once again, we face a dilemma: how can we help them take the risks they must without encouraging dangerous—even life-threatening—behavior, which has become very prevalent in many communities throughout the Nation?

For most of us, risk taking at age 12 or 13 meant using an occasional bad word, perhaps smoking a cigarette, misbehaving in school. Now, however, risk taking might involve the use of alcohol and other drugs, sexual activity for which teens are not emotionally or intellectually prepared, or

antisocial behavior, such as shoplifting or vandalism, which leads to trouble with the law.

Drug abuse is a risk for today's youngsters that existed on a much smaller scale in past generations. They **must** take risks of some kind, to learn their own boundaries. But we have to convince them that using alcohol and other drugs is not an acceptable risk.

> Psychologists and sociologists say that when individual families fail to establish hard-and-fast rules at home, they are also unlikely to join around standards for the whole community. And, they warn, when collective community standards erode and neighborhoods become less cohesive, parents have less ability to affect the values that their children will encounter in the popular culture.
>
> Today, clothing manufacturers, ad agencies and pop stars often seem to determine what children wear. Youngsters live in a world of brand names and $100 sneakers, and, parents and children agree, kids worry over their clothes, compete over them, neglect school for them and often ostracize those who do not dress as they do.
>
> *Ron Harris*
> *Los Angeles Times*
> *May 12, 1991*

Super-sensitivity. Adolescent friendship is often fickle. Many adolescents, eager to develop new relationships, leave old friends behind. These friends may blame themselves when relationships they have had for years come to an end. Children at this age are especially sensitive to the changing nature of friendship. They feel unworthy and unattractive. They become upset and depressed because they must rely on people in whom they have little trust. Although they strive for independence and self-sufficiency, they feel that they cannot manage completely on their own, even though many are called upon to do so.

The "useless" age. Ours is the only society in history that has created a group of people with virtually no productive role: early adolescents. Even though they need to be needed, we no longer rely on them to help us in our homes, our

stores, and our community. Laws prevent teenagers from obtaining jobs before age 14, so while society protects young adolescents from being exploited, we have given them few opportunities to be engaged in positive pursuits.

When they try to pursue adult activities, we tell them that they are "too young"; when they act their age, we tell them to "stop behaving like children." Remember what it was like when you were 12 years old? Today's technology has made youngsters this age feel even less valuable than those of previous generations.

Feelings. Young adolescents have difficulty controlling their emotions. They may have outbursts of crying, fighting, or swearing at inappropriate times. They are usually embarrassed by these episodes, but feel honor bound not to admit any wrongdoing.

In addition, they have emotional concerns about their body changes. They are confused about what is happening to them physically, so they tend to react very strongly to anything that has to do with their sexual growth. They are just as embarrassed about maturing too quickly as they are about growing too slowly.

Some children this age worry a lot about schoolwork, tests, and report cards. Along with their worrying, however, they may assume an "I don't care" attitude. In most cases, this is just a way to defend themselves, pretending that things that mean a lot to them really don't matter so much.

Children between the ages of 10 and 14 have a lot of anxiety, are easily angered, and take longer to recover from emotional outbursts than when they were younger. They are trying to figure out who they are, and they often don't much like the looks of the person they see in the mirror. Many also are living with very high levels of stress with which they have few coping skills.

Getting along with others. This is the time when children become very concerned with the standards set by their friends. They show independence in their choice of friends and are very loyal to their group. When parents are unhappy

about these friendships, children this age may insist on their right to choose the people with whom they are going to associate. They may change friends frequently, depending on the pressures from different groups and their shifting interests, needs, and wishes.

Although the herd instinct is strong, it is not unusual for a child to feel that he or she has no friends. Feelings of being excluded may disappear with the next phone call or may continue and cause the child to be withdrawn and sad, or to act out and be aggressive. Some children find it hard to make friends because they are shy or because they look or act different from most of their classmates. We can help with friendships by encouraging a child to join groups in which everyone enjoys the same activity and by welcoming another youngster over to spend the night or just to "hang out."

Many of these children are beginning to exert their independence by breaking away from parental controls. They are often critical toward their parents and toward society in general. At about age 13, many of these youngsters appear to be indifferent to adults, especially teachers and parents. They are more concerned with presenting a positive image toward their friends. This doesn't mean that they don't still love and need us. They just have difficulty expressing it.

They have a growing interest in privacy. They crave time alone, to balance the time they spend with their friends. Some of this probably has to do with their need to think things through.

Beginning at about age 11 or 12, many early adolescents spend a lot of time on the telephone with their friends or "hanging out" with them. Many are beginning to show interest in the opposite sex, which takes the form of teasing. Many of them are quite fearful of society's expectations for sexual roles and socializing.

An exciting social growth that takes place at this time is their ability to work in teams. They like to do things as a group—to produce their own comic books, to make music, to sing together, to do line dances, and to begin having parties

together. Much of the relating between the sexes is tentative, but interest is growing rapidly.

Physical growth. Many girls, beginning at age 10, show a rapid increase in weight. As they mature sexually, their bodies get back into proportion. Boys often display awkwardness, restlessness, and "laziness" as a result of their uneven growth.

Both sexes are often quite willing to work hard at acquiring physical skills such as dancing or skateboarding, but they also are very self-conscious about their bodies and their awkwardness.

Thomas dragged his small frame up on one elbow. He looked tired and lost. The acrid smell of bodies wafted up around him. He rubbed his faded blue eyes as though that might magically change the picture. Thomas had lived like this for three months.

Every day in America, experts say, 100,000 youngsters wake like Thomas—homeless, destitute, drained. They and their mothers are the fastest growing segment of the homeless population, according to the National Academy of Sciences.

Over the course of this year, officials say, an estimated million children will be without a home for some period of time, spending their nights in cars, parks, public shelters, cheap motel rooms, doorways or vacant buildings.

These youngsters are in addition to the estimated 1.3 million teenage runaways and "throwaways" rejected by their parents who try to get by on their own, officials at the National Network for Runaways and Youth Services say. They eke out an existence on the streets through menial jobs, prostitution, petty theft and a variety of hustles.

Almost all of these children are homeless because of some problem or failing of adults—unemployment, underemployment, alcoholism, drug addiction, mental illness, child abuse, spousal abuse, neglect.

Ron Harris
Los Angeles Times
May 15, 1991

At about age 11 or 12 secondary sex characteristics, such as breasts and pubic hair, begin to develop. They are excited about these body changes but may have difficulty accepting them. Adolescents are anxious about their physical attractiveness to others, and they spend a lot of time worrying about their hair and their complexions.

Children this age begin showing an increased appetite and tend to indulge in a lot of "junk food," regardless of parental warnings.

At about age 12 some children begin to experience periods of extreme fatigue, although they are reluctant to admit it. Simultaneously, they are restless and have great bursts of energy.

Children's bones and muscles grow at different rates during early adolescence, which makes it difficult for them to sit still for long periods of time. **They actually do have "growing pains."** This is one of the reasons they may assume strange positions while reading, socializing with friends, or talking on the telephone. It's also one of the reasons they find opportunities at school or at church to get up and walk around.

Learning. Younger adolescents (10- and 11-year-olds) are often not as organized as they were in elementary school. The basic skills (manners, getting along with others, responsibility, cleanliness, etc.) they learned earlier, at home and at school, need to be repeated and reinforced. They think in concrete and black and white terms and have not yet developed their abstract thinking abilities. Therefore, things don't make a lot of sense to youngsters at this age because they still see facts and ideas in isolation. For instance, they may remember the details of a war or a street fight but find it difficult to understand how people on both sides of an issue could think their side was right. Although they are beginning to develop reasoning skills, they still act unreasonably. **This is why it is so important for them to begin to understand how to make decisions.**

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Early adolescents tend to develop an interest in heroes, often entertainers or sports figures. Their dreams of glory usually have more to do with the public approval of these people and are related to the children's own feelings of inadequacy. They may choose a public figure whose standards are much different from your family's, thereby earning your disapproval.

Although they are still reluctant to get too involved with grownups, they like to discuss their experiences with adults, particularly adults other than parents. Aunts, uncles, older brothers and sisters, tribal elders, community leaders, and especially teachers become extremely important in the lives of these youngsters.

Also, 13- and 14-year-olds begin to see relationships among similar ideas, concepts, and experiences. By 7th or 8th grade, children begin to assume personal responsibility for their own learning. Although their interests come and go, they begin making important decisions about careers, behavior, and their intellectual worth. They are easily discouraged if they don't achieve their aims.

Values. Early adolescent youngsters are trying to find their own values, apart from those held by their families. This does not necessarily mean conflict; however, it often means a testing of boundaries. Almost every day brings a battle of wills. Sometimes these are about bedtimes, parties, curfews, language, or rules; sometimes, they have to do with the family's or community's beliefs. Adults' standards for behavior are often ignored, questioned, or defied.

Children at this age begin to have real conflicts about right and wrong. They are not used to making difficult choices, and they have a hard time understanding "shades of gray." A simple "yes" or "no" is much easier for them to take than a "maybe," which just leaves them confused.

At about age 12 or 13, youngsters like to experiment with different attitudes, beliefs, and emotions. They often are interested in the religious ideas of others but have a hard time understanding how anybody different can believe

"something that dumb." They also begin to realize that there is a world out there that is not like their own. Because they are questioning everything about themselves, they also question things that in earlier years they accepted as true.

Children of this age have very high ideals, and they are looking for love (as advertised on TV), beauty (as seen in teen magazines), and justice (available to everyone else, but not to them and certainly not in their families). They are getting better at seeing the world more critically, but they often are not able to be objective; they still see everything through the filter of their own personalities and their immediate needs.

> Schools across the country have found that they must compensate for what children are not getting at home before they can even begin the learning process. That can mean supplying everything from the morning meal to drug counseling to medical care to day care—and sometimes even to day care for the students' own children.
>
> Jane Flanders, a counselor at Emily and Jarod's school, Walter Reed, said many parents "don't" know how to deal with their own problems, so they become the children's problems. The parents aren't coping, so the children don't. We have a generation of parents who don't set limits, don't follow through, who aren't being firm enough. These kids run over their parents.
>
> Educators say they find today's children more street smart and less book smart. Psychiatrists and teachers say they are more responsible—but largely because, in a world where they must more often fend for themselves, they have to be.
>
> *Ron Harris*
> *Los Angeles Times*
> *May 12, 1991*

Because they have confusing feelings about their identities, they often seek a more active religious involvement, to establish some sense of belonging to a group and being with people who share the same ideas. Religion, with its rituals, allows them to feel part of something bigger than their own family and neighborhood, and these activities give them a structure through which they attempt to find more meaning

in life. It is not surprising that many religions set age 12 or 13 for youngsters to affirm their commitment. Children at this age are anxious to make a "rite of passage" and want to be accepted as young adults in their community.

A Note on Diversity

Any discussion of the characteristics of a group of people such as young adolescents must be tempered with an understanding that ours is a diverse and changing society. Generalizations are helpful in making initial decisions, but an effective campaign requires a much deeper knowledge of the populations to whom a message is addressed.

Most research has focused on White, middle-class Americans. When advertising agencies want to address specific groups to sell products, they make a strong effort to learn about the preferences of the "target population" in terms of graphics, music, social activities, credible spokespersons, and ethnic culture. It is wise for us to take the same approach.

There is a lot of talk about "at-risk" children. We prefer to think instead about children who come from high-risk environments. These are often the children of poverty, children who come from families that do not support growth in self-esteem, children who live in physical danger, and children who experience little or no success in school. These youngsters often have no sense of a positive future. They become involved with alcohol and other drugs, have children of their own, experience difficulty with the legal system, and carry a sad, hopeless existence into another generation.

More than 20 percent (nearly 12.5 million) of all American children (43 percent of African-American and 40 percent of Hispanic/Latino children) live at or below the poverty level. Children living in extreme poverty and deprivation are more likely to become enmeshed in delinquent and alcohol and other drug (AOD)-using behavior. But alcohol and other drug use is not limited to those who live in

poverty, and more White youth drink, smoke, and take other drugs than African-American or Hispanic/Latino youth.

Some 6.6 million children under the age of 18 live in homes with an alcoholic parent.

More than 1 million adolescent girls become pregnant annually; half of these young mothers never complete high school.

> Children growing up in America today are twice as likely as those in their parents' generation to be murdered before they reach the age of 18, and more than three times as likely to commit suicide, according to the National Center for Health Statistics (NCHS).
>
> On the average day, six American children will be slain and another 13 will take their own lives, for totals of about 2,000 homicides and 2,400 suicides a year. Before the year is out, more than 3,500 will die in drug- and alcohol-related traffic crashes. Thousands more will come near death as they are beaten, stabbed, shot or fired upon, according to FBI statistics and law enforcement officials.
>
> NCHS data show that violent death arrives at the doorstep of America's youth largely irrespective of race and class. Traffic accidents are the most common cause of death for all youngsters. Among the races, African-American and Latino adolescents are most likely to be slain, often at the hands of another young person, NCHS statistics show. White youngsters have the highest incidence of suicide; they also make up half of the nation's youth homicides, according to the NCHS.
>
> *Ron Harris*
> *Los Angeles Times*

Fifty-four percent of American children in female-headed families with no husband present (6,700,000 children) live at or below the poverty level; this includes 45 percent of White children who are in female-headed families, 67 percent of African-American children, and 72 percent of Hispanic/Latino children in such families.

It stands to reason that children from such backgrounds are not likely to be inspired to avoid AOD use by the same messages that reach the more affluent. When a child

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sees that, in the midst of poverty, the drug culture has made some people rich and apparently happy or that AOD use appears to numb adults to the realities of a difficult, threatening environment, it may be hard for them to believe that refusing alcohol and other drugs will make their lives better. Even those who intellectually reject AOD use may find it hard to resist the models in the home or community.

Over the past 20 years, Hispanic/Latinos have emerged as one of the fastest growing segments of the U.S. population. Since 1980, in fact, the Hispanic/Latino population has increased by approximately 34 percent, while the non-Hispanic population has grown by only 7 percent. Current estimates place the Hispanic population at 19.4 million in the continental United States, with another 3.2 million in the Commonwealth of Puerto Rico. This high growth rate is projected to continue.

This group also is one of the youngest segments of the U.S. population: their median age is 25.5, compared to 32.9 for the general population. We need to reach large numbers of the children of this group with primary prevention messages before they begin to use alcohol or other drugs.

There are numerous subgroups in the Hispanic/Latino population, including Mexican-Americans, Puerto Ricans, Central Americans, Cubans, and South Americans. Each of these groups has a rich culture, different from the others. Some researchers note, for instance, that Puerto Rican Hispanics respond best to "high" grammar, while Cubans respond more to slang usage. Novellas or pictorial stories play a part in some Hispanic cultures; for them, a comic book or dramatic format for your message might be appropriate and effective.

The Hispanic population is concentrated in nine States as well as large cities and includes many young people. This group has more female-headed households and fewer married couples, proportionately, than the general population. Families, however, are very strong and very important, although there may be conflicts between generations because of differences in acculturation. This

population is at a higher risk for teen pregnancy and juvenile incarceration than youth in general in the United States.

> The Children's Defense Fund, a Washington-based child advocacy organization, says that on the average day in the United States:
>
> - 2,407 babies are born out of wedlock, 676 to young women who have had inadequate prenatal care.
> - 2,740 teen-agers get pregnant, 40 for the third time.
> - 1,105 teen-agers have abortions, 369 miscarry and 1,293 give birth.
> - Nine children die from gun-shots, six are murdered, seven commit suicide and 684 attempt suicide.
> - 7,742 youngsters become sexually active and 623 children get syphilis or gonorrhea.
> - 1,849 children are abused and 3,288 run away from home.
> - 1,629 teen-agers are in adult jails.
> - 2,989 children see their parents divorce.
> - One child in five wakes up in poverty and 100,000 go to bed homeless.
>
> *Ron Harris*
> *Los Angeles Times*
> *May 16, 1991*

Another population to whom you might want to address your message is African-American inner-city youth. Some of these youngsters live with their families in substandard housing. They often are surrounded by crime and violence, attend overcrowded schools, receive inadequate health care, and lack positive male role models. The children have strengths, however: they often have a strong sense of self-reliance, and they easily maintain contacts with several adults and siblings or peers. Although many of them do not do well in school, they have skills that serve them well in their environment. Many of the children understand the

realities of their situation well and have little faith in their chances for economic or educational achievement in mainstream society. Because the drug culture surrounds and threatens these children at a very young age, it is essential that we reach them in their early adolescent years. By the time they are older teenagers, they are extremely vulnerable to the easy accessibility of alcohol and other drugs in their communities, the lure of quick money from drug dealing, and the dwindling hope of any other sort of future.

Traits Common in Young Adolescents

- A high level of emotional and physical energy combined with long periods of "hanging out" and doing nothing productive by adult standards
- Indulgence in risk-taking behavior, coupled with easily hurt feelings
- A desire to be more independent from the family and, at the same time, a need to be nurtured and protected
- Self-absorption and a craving for privacy, together with great concern about being accepted by the group
- A tendency to demand privileges but avoid responsibility, and a developing concern about social issues and others

In the mid-1980s, the poverty rate for African-American children reached a 20-year high; one of every two is poor, compared with one in five of all American children. About 53 percent of all African-American youth are born to single mothers. In 1982, 70 percent of such single-parent African-American families with children were poor.

Because these inner-city children are self-reliant and strongly people oriented, they may be very receptive to prevention messages and adept at passing them on to others. These youngsters are very sensitive to nonverbal cues and often learn to exist in two cultures simultaneously —the one they see around them daily and the one that represents the larger, mainstream population. Because many of

these children learn to speak one way in their own neighborhoods and another way in school and the larger society, they are sometimes referred to as having "linguistic vulnerability." Those who develop prevention messages should pay particular attention to the language used in the messages—it is very important to pretest it with the target audience.

In a diverse society, varied approaches are necessary to reach varying audiences. Unfortunately, there is not much research to help you as you plan your strategy. By all means, if you are addressing a non-mainstream population, make certain that you speak to local church leaders and shopkeepers who know the population. Make an effort to work closely with culture-specific newspapers and radio and television stations; these people know their markets and understand the characteristics of their audiences.

The data in this section are taken from *Communicating About Alcohol and Other Drugs: Strategies for Reaching Populations At Risk*, OSAP monograph No. 5, publication number (ADM)90-1665, published by the U.S. Department of Health and Human Services and distributed by the National Clearinghouse for Alcohol and Drug Information, P. O. Box 2345, Rockville, MD 20852. It provides a complete discussion of issues regarding non-mainstream youngsters, and is a comprehensive source of the most up-to-date research on high-risk populations and also provides an excellent bibliography on specific ethnic or cultural groups.

Alcohol, Other Drugs, and Adolescent Social Structure

The use of alcohol and other drugs may be part of a general pattern of behavior and can sometimes be predicted by observing other patterns of teen behavior:

- Peer group acceptance is very important to teens. AOD use is sometimes a prerequisite for acceptance into and participation in a group.
- Alcohol and other drugs may sometimes be used by adolescents in the "weaning process," to assert their independence from their parents. Drug use in this case may be an act of defiance, nonconformity, or rebellion, and is seen by teens as a positive adult behavior.
- Early use of cigarettes, snuff, alcohol, and other drugs is often seen in Western society as a symbolic rite of passage into adulthood. Many teens also may use alcohol and other drugs out of curiosity, at first.
- Teens who drink alcoholic beverages (usually beer) often exhibit other antisocial behavior, skip classes, have a low sense of self-worth, and suffer from a sense of alienation from the mainstream, even though they may be accepted by their smaller group of friends.
- Alcohol and other drugs are sometimes used by teens in an attempt to cope with their frustration and anger and to relieve their anxieties. This is not surprising, as media messages bombard them each day with reinforcement for this concept.
- The earlier the age of initiation into drug use, the greater the probability of extensive and persistent involvement in it.
- Teen alcohol users lack a strong sense of positive involvement and attachment in their family relationships. Effective family functioning and parental family management can often discourage youths' induction into alcohol and other drug use, but youth from high-risk family environments (abusive or neglectful) must receive support from other sources.

WHAT'S THE PROBLEM?

Risks Associated With Teen Alcohol and Other Drug Use

Recent data (as shown in the 1989 *National High School Senior Survey*) indicate that high school seniors who use alcohol and other drugs are more likely than nonusing peers to approve AOD use, downplay risks, and report their parents and friends as being more accepting of AOD use. Heavy party drinking practices illustrate how adolescents tend to underestimate the risk associated with their use of alcohol; 73 percent disapprove of having one or two drinks daily, but only 60 percent disapprove of having five or more drinks once or twice a weekend, despite the fact that they associate greater risk with weekend party drinking (42 percent) than with daily drinking (23 percent). These apparently inconsistent findings may be explained by the fact that a larger proportion of this age group are themselves heavy party drinkers (39 percent) than daily drinkers (5 percent).

These practices and attitudes did not spring into being with high school seniority. In fact, many of the most severe AOD users probably never even reached their senior high school year in order to be a part of these alarming statistics!

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Although at first consequences and risks are generally more likely for teen drinkers who drink heavily either over a long period of time or on weekends, no data are available on what quantity and frequency of alcohol consumption interfere with adolescent development. Given the lack of information on safe amounts of alcohol and the risks associated with its use, **encouraging adolescents with positive appeals not to drink at all appears to be the most appropriate message.** Studies have shown that abstention greatly decreases the likelihood that an adolescent will engage in problem behavior. (The information in this section is drawn from the Be Smart! Don't Start! Campaign, Alcohol and Youth Literature Review, OSAP, 1987.) Beginning to drink greatly increases the probability that adolescents will become involved in problem behaviors, including the use of other drugs and disinhibiting sexual behaviors that may result in pregnancy and increased risk for acquired immunodeficiency syndrome (AIDS).

Most teenagers will not be persuaded to abstain from using alcohol on the basis of information about the associated risk. However, program planners may wish to review these risks. Compared with nondrinking youth, teenage alcohol users

- have a greater chance of becoming involved with other drugs and engaging in problematic behavior such as truancy, vandalism, petty theft, and property damage;
- have a greater chance of not learning many of the emotional and social skills necessary for a safe and productive life;
- have a greater chance of causing an accident or injury to themselves or others;
- begin experimenting with alcohol at an early age and have a greater chance of becoming heavy drinkers during their middle and late teens;
- have a greater chance of getting into trouble with parents, friends, and teachers;

- have a greater chance of using other drugs, such as marijuana, and cigarettes; and
- have a greater chance of engaging in sexual behavior that can put them at risk for developing AIDS.

Knowledge, Attitudes, and Practices of Adolescents Regarding Alcohol and Other Drugs

Data about the perceptions and practices of youth are documented in *Use of Licit and Illicit Drugs by American High School Students 1975–1984*, published by the U.S. Department of Health and Human Services (DHHS), National Institute on Drug Abuse (NIDA), and in the 1989 *National High School Senior Survey* and the 1989 *National Household Survey*.

Lack of knowledge about the social and legal risks associated with drug abuse is one obvious reason why adolescents use alcohol and other drugs. Frequently, more knowledge about risks will lead to a change in attitudes and may lead to a change in behavior, if it is supplemented by instruction in interpersonal communication techniques that help teens say no to alcohol or other drugs and yes to more healthy and safe choices. Behavior change may, of course, be motivated by other methods, such as raising the price of alcoholic beverages, changing the minimum purchase age for alcohol, or swiftly and fairly enforcing the penalties for alcohol-impaired driving.

Most adolescent AOD users are unaware of or unconcerned about the dependency that may result from their frequent use of tobacco, alcohol, and certain other drugs, and they tend to overestimate their ability to avoid personally destructive patterns of use. They need to learn to respect their bodies and those of others; we must somehow give them hope for a positive future.

Attitudes

- About one-third of students in grades four through eight believe that drinking alcohol is a "big problem" among kids their age, and about 40 percent say the same about drugs.
- Disapproval of cigarette smoking increased modestly from 66 percent in 1976 to 71 percent in 1980 and has remained fairly stable since then.
- A substantial majority of teenagers understand that regular use of alcohol or other drugs during the teen years is not just a phase, but a problem that may carry over to adult life.
- About 50 percent of 15-year-olds say that they would "just say no" if offered drugs by friends.
- Fully 41 percent believe that cigarette smoking in public places should be prohibited by law. A higher percentage (52 percent) think getting drunk in public places should be prohibited.
- About 60 percent of 15-year-olds report that they feel comfortable talking to their parents about drugs.
- Many teenagers think that teenage drinking would decrease if parents supervised parties more closely and if parents didn't drink so much.
- About 90 percent of high school seniors see "great risk" in trying cocaine in the crack or powder form.

Practices

- Fifty-nine percent of high school seniors say they are often around people using alcohol to get high.
- About 57 percent of high school seniors have used alcohol in the past month. Approximately 32 percent have taken five or more drinks in a row at least once during the previous 2 weeks.
- Males are twice as likely as females to drive after drinking.

- When African-American and White youth are compared, African-American youth have a lower incidence of alcohol use. There is an increase in the number of African-American youth who use alcohol after their high school years, however.
- With increasing age there is increased exposure to settings such as parties, in which alcohol is present and consumed.
- About 50 percent of 15-year-olds report having used drugs.
- About 10 percent of high school seniors have used cocaine at least once. It is quite common for cocaine users to consume large amounts of alcohol, because they say it diminishes the anxiety and the depression associated with the temporary cessation of cocaine use.
- Marijuana is the most widely used illicit drug among high school seniors. About 27 percent of high school seniors have used marijuana in the past year.
- Four in 10 teens between 13 and 15 years old have at some time been a passenger in a car driven by someone about their own age who is under the influence of alcohol or other drugs.

Community collaboration is needed to develop materials that will stop these destructive behaviors. It is unreasonable to expect that all teaching of values can come from the home, the schools, or religious organizations. Schools are overwhelmed in their unique role as the major providers of instruction in reading, writing, and math. Now they are dealing with social problems for which training and financial support have not been available. Churches and other religious organizations are powerful and important forces in some communities. To be effective, however, they need the collaboration and support of other community organizations to determine and achieve common goals.

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According to J. Howard Johnston, in his monograph *The New American Family and the School* (National Middle School Association, Columbus, Ohio, 1990),

> Through the 1930's, 1940's, and 1950's the average United States household contained approximately four people. It was the "typical family" of a working parent, a home-maker parent, and one or more dependent children. Indeed, even in 1960, 60 percent of all United States households were constituted in that way. By 1980, however, only 11 percent of American households looked like that of 1960; by 1983, the proportion had shrunken to 7 percent, and by 1988 was estimated to be less than 4 percent. Now, the average size of a United States household is just over two residents. This means that many families are having to cope with a smaller "human resource" in managing necessary affairs such as generating income, providing child care, or caring for an aging parent.

Johnston goes on to report,

> At present, nearly 15 percent of children are born out of wedlock, 50 percent of those to teenage mothers. And while the economic problems associated with teenage pregnancy and childbearing have not changed much in the past decade or two, the acceptance of this unwed mother phenomenon is growing, giving America the highest teenage pregnancy rate of any industrial Nation on earth. In fact, every day in the United States, 40 teenage girls—a school bus full—give birth to their **third** child! By some estimates, as many as 90 percent of unwed mothers keep their babies, raising them themselves or with the help of extended families, such as parents, siblings, or close friends.

These kinds of stresses on family life lead to less supervision, more stress and anxiety, and a concomitant need for supportive community services.

There is no reason to believe that a nontraditional family, a single-parent family, or a reconstituted family is not perfectly capable of raising and nurturing healthy, happy children. We must acknowledge, however, that any **additional** stress placed on even the most stable families dealing with young adolescents may have dire consequences.

Children's advocates, whose leanings run from conservative to liberal, offer a variety of often strikingly different proposals to improve the lot of youngsters.

Some would like to see much larger investments in the nation's public education system; others would like to offer vouchers so that parents could pay for schools of their own choice, including private and parochial schools.

Some propose programs to encourage mothers to stay home with their children; others propose solutions like increased business use of flexible working hours and the family leave bill, which would allow either parent to leave a job for up to a year and return at the same salary and position.

Some offer strategies to better aid dysfunctional parents so that their children do not become wards of the state, whereas others would like to see a mandated limit on the number of children welfare recipients could have, or a return to orphanages to deal with the growing numbers and costs of foster children programs.

Some propose national medical care for all children, regardless of income. Others argue that cutting taxes would strengthen families by leaving them more money to care for their children.

But all sides say there seems to be very little public enthusiasm for examining any of their proposals.

As studies have increasingly shown conditions for America's children worsening—particularly since 1980—a core of business leaders, educators, politicians and others has warned of the impact on the nation's future.

"We are absolutely convinced that if we don't take action immediately we're going to find ourselves with a failing economy and social unrest," says Roseann Bentley of the National Assn. of State Boards of Education after her organization conducted a study of the status of today's children.

"If you have ill-educated young people, you won't get the services you want" when they are grown, [Ruby] Takanishi [of the Carnegie Counsel on Adolescent Development] warns. "When you go to the hospital, you'll get the wrong drugs. You won't have the people for a productive work force."

"It's sort of pay me now or pay me later," says Bill Harris, founder of KIDPAC, which is the nation's only political action committee for children, out of more than 4,600 PACs. "If people continue to shove kids underneath the table, they will wake up to the realization that all the kids we threw

away are coming back and eating up our taxes, our safety, and that we need them in the work force."

That message, however, has yet to find a place in the public's mind, analysts say.

"There isn't yet the connection among people who are more affluent that this is going to affect their standard of living and their children's standard of living," says Robert Greenstein, director of the Center for the Study of Budget and Policy Priorities, a research and analysis organization in Washington.

Ron Harris
Los Angeles Times
May 16, 1991

Identifying the Message and Reaching the Audience

Usually, groups that are planning a marketing campaign to sell an idea test the campaign on "focus groups" of typical consumers.

When OSAP and the Office for Smoking and Health used focus groups to determine how to present anti-AOD programs to early adolescent youngsters, they collected information that may be useful to you:

- Youngsters of this age respond to color. Currently, they like the combination of fluorescent green and black although these preferences change rapidly. Although these colors may not appeal to adults, a look at youngsters' clothing will show you that—given the opportunity—today's kids may not be interested in pastels or trendy, sophisticated mauves or beiges. If you want to attract an audience, first attract it visually.
- Youngsters seem to respond to logos that include animals. "Cute" animals are considered babyish by most early adolescents, but they may like tigers, pumas, cougars, and the like. Be certain, though, that you are aware of the significance of these animals in the youth culture. In some areas, for instance, teenage gangs use certain animals as emblematic symbols.

- The concept of danger is an important one. If the message you are trying to convey is that danger is real and is present in the lives of the youngsters, then by all means emphasize this point. The object, however, is not to frighten the youngsters; they have been jaded by horror films and television violence. If your point is to warn them of real threats to their safety, don't hesitate to do so.
- Youngsters seem to be interested in having "the winning edge," and it might be valuable for your materials to stress a potential loss of that advantage if the teen gets involved in AOD use. Be careful, though, that you have your facts straight. Many youngsters are aware that steroids, for example, appear to enhance athletic prowess and muscular growth. It is important that you acknowledge this fact, along with your information about risks involved in long-term use.
- Another kind of loss might occur in the social realm. Because young adolescents are very concerned about their status in the eyes of their peers, it is important to discuss the transitory nature of social approval for their use of alcohol and other drugs. There is no harm in informing them that the eventual outcome of AOD use will be a loss of friends, a loss of respect, and a loss of social status.
- The teens who were invited to talk about their preferences expressed strong feelings about the need for straightforward language. If the result of taking alcohol or other drugs is that a person will be dizzy or tired, say so! If something is bad or good, say so. If something will make them sick, let them know. If something that makes them feel good temporarily eventually will make them feel physically awful, let them know. Once again, make sure that your facts are correct so that your admonitions are not contradicted by their experiences.

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- Most early adolescents are interested in being part of a movement or a cause. Many don't like what they consider phony or "goody-goody," adult-instigated organizations, but **they do like to be part of a winners' circle,** and to have appropriate T-shirts, jackets, insignia, and identification badges.
- Use the culture that appeals to them. If rap music is what gets them interested, try getting your message to them through the lyrics. If particular entertainers will have an impact on them, try to enlist their support or endorsement. Ask the teens for advice in planning and implementing this part of your campaign. Your observations about teen culture may not be valid and could discredit your entire program.

What works with one group will not necessarily work with others. The approach that you take with a group of, say, Cambodian immigrant youngsters in Southern California may not be the approach to use with inner-city African-American youngsters in Milwaukee or suburban youngsters elsewhere. Different cultures operate differently. If you are planning a campaign to influence youngsters it is important to spend a lot of time talking to the youth and the adult representatives of the community, to make certain you are not sabotaging your own efforts from the outset. The support of adult community members, particularly of the clergy, tribal elders, and other influential citizens, must be encouraged and celebrated.

SO WHAT?

Getting the Message Across

Helping young people avoid the use of alcohol and other drugs is a difficult challenge. Experience in many communities has shown that public education efforts can influence knowledge and attitudes about problems. Such efforts include radio and television public service announcements (PSAs), posters, billboards, transit advertising, bumper stickers, booklets, T-shirts, films, videos, bookmarks, and anything else that effectively transmits a prevention message. These methods are generally more useful for creating awareness than for altering established behaviors or discouraging behaviors among young adolescents. Public awareness, however, is a necessary component of attitudinal and behavioral change.

Distribution of information takes careful planning. How you present the message determines whether it is accepted and remembered. Other messages that associate the use of alcohol and other drugs with glamour, sophistication, and festive occasions are reaching youth. The potential for misdirecting or alienating target audiences with inappropriate messages is high. For instance, research has shown that scare tactics and moralistic overtones tend to turn adolescents off.

30 Make sure you test what may be to a youngster a mixed message. For instance, materials targeting youth that use recovering addicts or alcoholics as role models may send

a mixed signal to youth. A number of celebrities who have had problems with alcohol or other drugs are eager to use their celebrity status to help others. But the message the celebrity intends to convey may not be the message that teenagers and preteens receive. The celebrity may be saying, "Don't do it," but the youth are hearing, "I did it, and I'm okay now. Taking drugs is part of being famous." The celebrity may instead be persuaded to talk about how much you can have in life if a young person chooses not to use alcohol and other drugs.

We've offered some specific strategies for using the information about the youngsters described in the first section of this booklet. Remember, however, that the characteristics of youth and their AOD-related behavior vary among different schools, regions, States, and communities. Take a close look at the socioeconomic status of your target group and at their environment.

If the community is giving lots of pro-use messages (e.g., lots of tobacco and alcohol advertising billboards and transit posters; liquor stores on every block; easy availability; low pricing policies; and so forth) then it's hard to expect young people to pay attention to non-use messages. Pay particular attention to cultural heritage that might affect color and language choices, norms, and credible spokespersons. These efforts will increase the likelihood that your message will be understood, relevant, acceptable, and effective.

Interpersonal Communication

Lasting change in the behavior of youth probably will best be achieved through person-to-person communication, including group discussions about how to avoid AOD and positive reinforcement for abstinence. Prevention programs that help teens deal with life's pressures include training in assertiveness, communication with peers and adults, stress reduction, social coping skills, and general confidence building. Even where resources are unavailable for such a com-

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prehensive approach, efforts should be made to tap existing community services and programs so that reinforcement is as comprehensive as possible. Teenagers may acquire the attitudes that promote and reinforce abstinence through involvement with such programs as the Boy Scouts/Girl Scouts, YMCA/YWCA, Big Brothers/Big Sisters, Camp Fire Girls, Boys and Girls Clubs of America, and so on. In many communities, counseling services are available for teens at high risk and for those exhibiting problem behaviors. An inventory of relevant resources should be compiled to meet the demand for alternatives that generally emerges when prevention messages reach youth.

Teens are often very willing to get involved with programs to reduce AOD use among their peers. Such involvement gives them the opportunity to participate in a worthwhile activity while learning about and exploring issues, attitudes, and values. With their enthusiasm, spontaneity, and openness they can lend valuable creativity to the development of effective prevention approaches. However, many young people need time and encouragement if they are to assume an active, assertive, and responsible role. The opinions of teens should be respected so that their involvement will be a positive experience.

What To Tell Youth

The following suggestions provide a starting point around which public information messages and materials for youth about alcohol and other drugs can be developed. Each broad message is followed by key points that might provide ideas for messages that meet the objectives of your program.

Communicate: Choosing *not* to drink alcohol or take other drugs is a sign of maturity.

- Promote the idea that deciding not to drink or take other drugs is the more mature thing to do.
- Depict specific social coping skills that are considered mature by peers and adults.

Communicate: Alcohol or other drugs don't help people cope with real-life situations.

- Emphasize that avoiding alcohol and other drugs will increase the likelihood that the teen will be successful in school.
- Demonstrate how using alcohol and other drugs may interfere with the ability to develop social skills that are valued, such as asking for a date.
- Provide creative solutions and activities for coping with anxiety.

Communicate: Good friends respect your right to be you.

- Emphasize that being one's self is important.
- Emphasize the ideas of self-control, self-esteem, and self-assertiveness.
- Develop the adolescent's personal and social coping skills for resisting peer pressure and other pressures to use alcohol and other drugs.

Communicate: Not everyone drinks.

- Dissuade teens from the widely held but erroneous belief that "everyone" is drinking.
- Illustrate the acceptability of using nonalcoholic beverages by adults to counter the glamorous image of alcoholic beverages portrayed in the media.

Communicate: Be free of alcohol, other drugs, and hassles.

- Help clarify for youth the extent to which they risk getting in trouble if they violate the law.
- Suggest a good way to get parents to give rewards or privileges for staying away from alcohol and other drugs.
- Emphasize that getting into trouble with the law, school, and parents is disapproved of and looked down upon by most teens.

Communicate: People who drink are not bad people.

- Encourage youth to seek help if AOD use is a problem for them or for someone in their immediate or extended family.

Communicate: Stay alive; don't drink and drive.

- Demonstrate how young people can feel comfortable refusing to drink, to drink and drive, or to ride with someone whose driving performance is impaired.
- Acknowledge that being in control is extremely important to teens.

Target Audience

Based on a review of current data and an assessment of the service area population, you must decide which segments of your youth audience you want to address. Important information about AOD use by adolescents in a particular community can be obtained from the juvenile probation department, sheriff's office, district attorney's office, public health department, and drinking/driving programs. This information will help you to allocate resources to the groups with the greatest needs and also to design materials that best meet the needs of each particular group.

A key factor in addressing each target group is its level of readiness to act, to use or not use alcohol and other drugs. Selection of your target audiences is also based on factors such as degree of risk for early use, lack of knowledge about alcohol and other drugs, poor attitudes and practices related to drugs and drinking, or communities in which alcohol and other drugs are heavily promoted and easily available. Remember that communities and their practices greatly influence youth. The following are two sample youth target groups:

Youth approaching 14 years old. This group is anticipating the privilege of having a driver's license. They may be associating with older teenagers who are using alcohol and other drugs while driving. It is important to encourage them to adopt a conservative attitude toward AOD use so that they

are able to refuse offers of alcohol or other drugs and to refuse rides with impaired drivers. (Care should be taken to avoid a message suggesting that drinking is all right if driving is not involved.)

Message Development Guidelines

- Repeat the main ideas frequently.
- Recommend performing specific behaviors.
- Demonstrate the health problem, behavior, or skills, if appropriate.
- Provide new, accurate, and complete information.
- Use a slogan or theme.
- Be sure that the person presenting the message is seen as a credible source of information by the youth.
- Select a testimonial, demonstration, or slice-of-life format.
- Present the facts in a straightforward manner.
- Use positive rather than negative appeals.
- Use humor, if appropriate, but pretest the material to be sure it does not offend the intended audience.
- Be sure your message is relevant to your target audience.
- Describe risk factors that the teen can control: choice of activities, friends, and personal standards of behavior.

Youth in high-risk environments. These youth have been identified as children of AOD abusers and alcoholics; children with problems at home or at school; children seen by juvenile justice workers for delinquency problems; youth in highly mobile families; youth in institutional settings; and youth living in communities where heavy use of alcohol and use of drugs are either tolerated and/or condoned. These groups have a greater probability of being involved with alcohol and other drugs than do other youth. Materials should focus on the benefits and rewards of positive relationships with peers and family and good performance at school.

Strategies for coping with real-life pressures and situations are important for members of this group, who need alternatives to alcohol and other drugs.

AOD use is sometimes a part of being accepted by peers and for some peer groups is a prerequisite for membership. Teenagers often consider themselves members of distinct groups such as jocks, preppies, and so on. The degree, context, and style in which alcohol and other drugs are used may vary considerably among these groups. Program planners should be alert to the types of local groups and attempt to reach them by carefully selecting a spokesperson and focusing the language and content of the message. This strategy is particularly important in an environment in which groups may have contrasting and sometimes hostile values, attitudes, and leisure time activities.

How To Get Your Message Across

Select the medium through which your message about alcohol and other drugs will reach the target audience based on a determination of the most credible methods that will expose teens to the message as frequently as possible. Research shows, for example, that the typical American child spends a great deal of time watching television. In general, the time spent watching television peaks at age 12 and declines by 10 percent by age 18. Data gathered from a recent national survey found that eighth graders spend an average of 21.7 hours a week watching TV, 5.6 hours doing homework, and 1.8 hours on outside reading. Eighth-grade Asian-Americans and Pacific Islanders spend more time on homework (6.7 hours) and African-American eighth graders watch more TV—an average of 27.6 hours per week.

Television is the most influential medium, but the cost is often prohibitive. As young people taper off their TV viewing in their late teens, they increase their use of other media, particularly magazines, radio, newspaper, movies, and music. Radio, for instance, reaches 88 percent of the teenage population on an average day. They listen to more

than 3 hours each day, most frequently right after school and during the evening. Boys generally prefer hard rock stations while girls choose soft rock music. Be aware that what is listened to might be influenced not only by gender, but by age, peer identity, ethnic and cultural background, level of maturity, and geographic location (e.g., city or rural).

In general, when the message is rather simple, radio and television are the most persuasive. When the message is fairly complex, comprehension and persuasion are better achieved through print. Campaigns that combine many approaches assure repeated exposure to maximize the effect of your message.

Teenagers in one Michigan study ranked a variety of sources of information for learning about alcohol-impaired driving, types of alcohol, characteristics of drinkers, and alcohol problems. The following sources were ranked in order of their importance:

- TV PSAs
- Parents
- Friends
- News stories
- Books and pamphlets
- TV program portrayals
- Teachers
- Own experience
- TV beer ads
- Doctors
- Radio PSAs
- Magazine liquor ads
- Siblings
- Songs on radio and other forms of music

Always consider how young people receive information apart from the mass media. Many have regular contact with a local church, a school, recreation centers, or youth

organizations that may be interested in collaborative efforts or serve as points of distribution for materials aimed at youth. Informal meeting places or hangouts may provide the only point of contact with some young people who have no formal affiliations. These youngsters may be found at the drugstore near a magazine rack, in an arcade, at a suburban shopping mall, at bowling alleys, beaches, and in many other settings. Placing messages and materials in appropriate locations increases the likelihood of reaching this segment of the youth population.

Whatever medium you choose, it is important to remember that exposure to messages does not occur in a vacuum; other media may be supporting or countering campaign themes. Television, magazines, music, and movies relay many messages about alcohol and other drugs to adolescents. They may imply that getting drunk is fun or a way to handle depression, or they may describe the tragic consequences of AOD use. Advertisements try to interest the audience in alcohol through sex appeal, power symbols, excitement, and fantasies that have no direct relation to the actual product.

Message Appeal

To have a positive impact, the format and content of all materials must first be appealing to youth. Many public information materials and messages are dull or too complex. Exciting, dramatic, humorous, engaging, and understandable styles make the message more appealing. Your audience will more likely trust spokespersons whom they hold in esteem and who are similar to them in language, values, and personal and social characteristics. Teenagers tend to prefer characters who treat them with respect and who refrain from judging their behavior. The techniques for conveying a message that have worked well for commercial advertisers are

- problem solution (stating the problem and the solution);

- humor;
- unusual characters (personalities or celebrities who become identified with the message);
- slice-of-life enactments in which a doubter is converted; and
- candid camera testimonials.

Adolescents are quick to discern and reject a judgmental tone emanating from adults or peers. Teens are very concerned about their social interactions and relationships; they do not want to look stupid or lose control in front of their peers. Girls do not want to take responsibility for reproaching the behavior of boys, and boys may not accept other teens' telling them what to do. Teens generally tend to reject any message in which one peer is judging the behavior of another. Thus, a PSA showing a young person judging his or her own behavior—smashing the family car—as "stupid" is more effective than having someone else make remarks about the behavior.

Teenagers describe their peers who frequently get drunk or stoned as foolish, irresponsible, rude, loud, immature, and obnoxious. Positive characteristics (with the exception of "humorous" and "popular") are seldom linked to the drinker. The drinking teen is not seen as mature, sophisticated, respected, in control, or confident.

Teenage boys tend to place a great deal of value on outstanding athletic performance. They value being masculine and they will respond to messages that provide a gender-related reason for not drinking or taking other drugs, such as reduced stamina and strength. However, because some teens feel as if they perform better under the influence, messages must reinforce the reality that performance is improved if one does not drink or take other drugs.

Messages that stress positive benefits, give a sense of control, and decrease anxiety and fear by providing specific methods for positive action are most appealing to youth. Arousing fear through scare tactics such as depictions of gruesome car accidents may be counterproductive, because

teenagers truly believe they are too young to be seriously injured, to die in an automobile accident, or to drown.

It is extremely important to use jargon familiar to the target audience. For instance, adults may prefer "intoxicated," "inebriated," or "drunk," but many teens currently use "buzzed," "bombed," or "wasted," and they make clear distinctions among them. Because the terms in vogue change frequently, you need regular interaction with teenagers to keep the language current.

The following guidelines will help you develop messages and materials for youth:

Make your message believable. It must reflect the values and feelings of the target audience. Teenagers don't want to lose control or otherwise lose face. In fact, many boys believe that refusing to ride with a drinking driver will gain the respect of one's peers.

Make your message eye-catching. It must hold the teenager's attention and be sophisticated as well. Whenever possible, the direct message should use the current colloquialisms of the target audience. By the same token, the message will have more of an impact if it reflects a teenage perspective. Teenagers report that "you can maintain control if you don't drink," meaning that you won't look stupid, get sick, be unable to drive, make a fool of yourself, become violent, or be sexually vulnerable.

Make your message motivating. To get teens to take action, the message must be transmitted by a character that the target audience likes. Teenagers say they like characters who treat teens with respect and who do not judge. Teens seem to be motivated if one simple, positive, clear message is presented, along with the suggestion of an immediate reward. Demonstrations of specific behaviors and skills, such as tactics for saying no, may contribute to a positive audience response.

NOW WHAT?

A Framework for Planning, Developing, and Promoting Messages and Materials for Youth

To help ensure that program planners allocate time and other resources efficiently in developing messages and materials for youth, a six-stage communications process has been developed. This approach has been used by many health agencies, including the Office for Substance Abuse Prevention, the National Institute on Alcohol Abuse and Alcoholism, the National Cancer Institute's Office of Cancer Communications, and the National Institute on Drug Abuse. It can easily be adapted by volunteers at the local, State, or national level concerned about youth AOD problems.

The premise of this process is that health communications should be based on an understanding of the needs and perceptions of the target audience. It is designed to allow for variations in environments and to maximize opportunities for creativity. There are many possibilities for you to reach youth with information about alcohol and other drugs.

This process can be used by program planners developing AOD-related materials such as pamphlets, posters, flyers, newspaper advertisements, television and radio PSAs, broadcast programs, films, and slide shows. Although in some cases the program will have decided on the materials to be developed before undertaking the planning process, new ideas are likely to be generated during the

message and materials development stages. In fact, it may be decided that the most effective way to reach youth is through approaches such as T-shirts, minidramas, comic books, or bumper stickers. Combining several of these materials into kits with a central theme is recommended as a comprehensive method for attracting the attention of young people.

The steps outlined below constitute an ideal process, one that may require more time and money than many agencies can afford. Adapting materials that others have developed, with their permission or cooperation, is one way of shortening the route. Before devoting time, energy, and other resources to developing materials from scratch, check with other organizations to determine what they are doing. (Prevention Resource Guides listing many materials are available free from the National Clearinghouse for Alcohol and Drug Information, 1-800-729-6686.) In addition to avoiding duplication of efforts, these contacts may lead to joint projects with shared resources and information. These groups also can help get information to their members by printing articles in their newsletters or distributing printed materials. Perhaps other groups will be interested in distributing materials, thereby expanding the audience reached.

Many State and national organizations have developed packets of materials aimed at youth. These packets have included press releases, booklets, PSAs, and other materials that can be adapted for local use. Some of the groups you may wish to call are

- local affiliates of voluntary national organizations such as the National Council on Alcoholism and Drug Dependence;
- OSAP's RADAR Network Centers;
- county and State mental health and social service departments;
- statewide councils on alcohol and drug abuse;
- special organizations for youth; and

- national voluntary groups—for example, the National Association for Children of Alcoholics or the National Congress of Parents and Teachers (PTA).

Some of the steps described below may not be feasible; others may not be essential. However, all planners developing messages and materials should write a concise communications strategy that includes writing program objectives, defining target audiences, and identifying the needs and perceptions of each target audience, the actions they should take, the reasons they should act, and the benefits to be gained.

1. Planning and Strategy Development

During the initial stage, target audiences and communication strategies are selected. A more indepth analysis would entail reading other literature, new articles, academic journals, and reports.

For example, the *Los Angeles Times* ("Growing Up in America: The Reality of Childhood Today," May 12–16, 1991) and *Chicago Tribune* ("Children of Dependency," Nov. 8, 1990) each published an excellent series that deepens understanding of AOD use and the many other problems youth face today. Excerpts from the *Los Angeles Times* articles appear in this booklet.

Many communities have access to specific data about the characteristics of youth in their community that would be helpful in formulating a strategy. This information may be available through local or State health planning agencies, mental health agencies, and other community service programs. Contacting the National Clearinghouse for Alcohol and Drug Information (1-800-729-6686) may also be a worthwhile first step.

The more data gathered and analyzed, the more complete the profile of the target audience. In some cases you may choose to conduct research that involves direct contact with youngsters representing the target audience. This

research could include interviews with a small sample of teenagers, a small-scale telephone survey, or a household survey of a random sample of teens. Program budgets and timetables dictate what is feasible.

From the information collected and analyzed, program planners can develop a communications strategy. The communications strategy is a statement of your program objectives, the target audiences to be reached, and the benefits and other information to be communicated. Your strategy also should include general specifications, including format and length, to provide direction for the development of specific messages and materials. Don't forget to summarize your expectations for your communications campaign!

2. Concept Development

Based on the planning in stage one, message concepts are developed in stage two. These concepts may consist of rough artwork (a line drawing or sketch) or words or phrases to convey the main idea and the source of the message. Involving the target audience early can help eliminate weak approaches and identify effective message concepts.

Developing message concepts involves several issues, as we've already discussed:

- What type of message format should be used? A testimonial from a celebrity or a person typical of the target audience, a slice-of-life, or a vignette?
- What type of spokesperson should be used to convey the message? A member of the target audience, an authority figure (male or female), a couple, a group, or an individual?
- What is the appeal—emotional, logical, or humorous?

The idea here is to determine who will get the message. What will they be doing when they receive it (riding in a car, sitting in a living room, hanging out, and so on), by whom it might be delivered, and so forth.

One method of checking out your concepts is to pretest them. Pretesting is a way to gather reactions from the target audience and make improvements in concept messages and materials while revisions are still affordable. Pretesting is not foolproof, but it can help reduce uncertainty and the risk of producing materials that may be misunderstood or misinterpreted.

Focus group research is a widely used method of pretesting, both at the concept stage and when the messages or materials have been developed. An experienced leader guides 8 to 10 participants through a discussion of a selected topic, allowing them to talk freely and spontaneously. The assistance of your local advertising association, school system, and teen club or other youth activity group might be enlisted to recruit participants. The steps for organizing focus group research are as follows:

- Identify materials or concepts to be tested.
- Select a skilled group moderator to lead the discussion.
- Develop a moderator's guide for the discussion that might include questions leading from a general focus to a narrow one to elicit group reactions on the issues, concepts, messages, or materials.
- Arrange for logistics such as a comfortable room and recording equipment. With young adolescents, don't forget food!
- Identify and recruit focus group participants from the target audience.
- Confirm attendance with participants before the session.
- Videotape or record the session if possible.
- Transcribe the tape and prepare a brief report for use in planning and revision.

3. Message Development

Once the concepts with the most potential have been selected, complete messages and materials can be created in appropriate formats for reaching young adolescents. These messages and materials should be produced in rough form, such as a radio announcement produced in a nonstudio setting with nonprofessional talent or a booklet using typewritten copy and a rough layout of the artwork as it might appear in the final form. At this stage, rather than generating more ideas and perceptions about concepts, pretesting should provide specific information about the following:

- *Attention.* Does the product attract and hold the attention of the youngsters?
- *Comprehension.* Is the message clearly understood? Are the main ideas conveyed?
- *Personal relevance.* Does the target audience perceive the message to be important?
- *Believability.* Are the message and its source perceived as believable by the teens?
- *Acceptability.* Is there anything in the message that may be offensive or unacceptable to the target audience?

Other gauges of effectiveness may include target audience perceptions about the information contained in an item and the extent to which the audience finds messages or materials attractive, interesting, convincing, or alarming. Also, separate components of the item can be pretested, such as the cover or illustrations for a booklet, characters in a film, and so on.

Testing methods at this stage might include focus groups, "gatekeeper" reviews by the key people who will distribute the product, or reviews by other experts. Many of the individuals involved in such pretesting may be willing to donate their services, especially if they are potential users of the materials.

4. *Promotion and Distribution*

During this stage, the product is completed, produced, and distributed. The results of pretesting should be carefully examined to determine the necessary revisions. Typical areas in which improvement might be needed are the following:

- If pretesting reveals that the youngsters do not understand certain phrases or words, add definitions or find out if different words meaning the same thing are used by your audience. Slang is sometimes more persuasive to teens than fancy words and may be greatly influenced by cultural or ethnic identity. Use caution, though, because some slang usage can be offensive to different groups.
- If the pretest indicates that teens do not understand or are confused by the message or materials, consider ways to simplify. Try not to be too wordy, but consider ways to repeat the main idea of the message.
- If the audience is offended by the message or the way in which it is presented, find ways to change the message to make it more positive and acceptable.

Promoting and distributing materials are essential aspects of a successful communications campaign. Survey the community to determine the places where teens tend to congregate and develop relationships with agencies that serve youth. Music stores, youth centers, diners, fast food restaurants, and movie theaters are just some of the locations frequented by youth.

A program with extensive community involvement—volunteers, State authorities, the private sector, schools, political and government leaders, experts, and celebrities—is more likely to be successful in distributing materials to as many places as possible.

Community businesses not directly involved will usually be happy to help by placing materials in their place of business.

Radio and TV stations are no longer required to donate a specific amount of time to PSAs. However, the Federal Communications Commission (FCC) does consider a station's public service performance—the amount of time devoted to PSAs and programming of importance to the community—when deciding whether a license should be renewed. Consequently, stations are sometimes willing to donate public service time to promote worthwhile campaigns. They may even be willing to produce the announcements for you and to use their own personalities as narrators. In addition, consider working with TV and radio in the following ways:

- Write questions for a talk show interview and suggest community leaders, celebrities, or others who can speak knowledgeably about AOD problems among youth.
- Provide background information to radio and TV stations about AOD-related knowledge, attitudes, and practices among youth.
- Plan to videotape special events and speeches made by major public figures addressing the problem.

Personal contact is the best approach to use in developing a positive relationship with media persons who will display, feature, or air public information. Radio and TV public service directors are usually more willing to air a PSA if they know a representative from the sponsoring program.

You also need to establish personal contact with newspaper and magazine editors. Whenever possible, news releases should be written and submitted to the editor. Many magazine and newspaper editors are amenable to collaborative arrangements so that their writers are provided with fresh news stories, feature story ideas, and useful background statistics and information.

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Billboard companies may provide advertising space during their off-seasons.

5. Evaluation

The purpose of evaluating a communications campaign is to determine whether it has had the desired effect. That is, has it met its objectives? In this stage, the effectiveness of the distribution strategy and the receptivity of the target audience to the materials are evaluated. Counting the number of pamphlets distributed does not measure the outcome or effect of the materials. An informal telephone survey of persons who have requested the program's materials might provide some valuable information on its usefulness. Including an insert in your publication requesting comments may elicit some feedback. A more formal survey, of course, requires more money and a careful determination of whether any changes in knowledge, attitudes, and practices are attributable to your campaign. Literature on evaluation research is helpful and should be consulted early in the process of developing and distributing materials and messages.

The following key considerations are pertinent to all evaluations:

- What was the degree of exposure of the target audiences?
- Did the target audiences recall your specific message?
- Did the target audiences accept or reject the messages as being relevant to them as individuals?
- To what extent were changes in target audience attitudes, beliefs, and behaviors attributable to the messages and materials?
- To what extent were changes in target audience intentions to take appropriate actions influenced?
- Did the effectiveness of the campaign vary according to the demographic characteristics of the audiences (sex, age, race, family income, and so on)?

- What was learned in the campaign about target audience characteristics and receptivity that would improve the messages and materials?
- What was learned in the campaign that could be used to plan future communication activities?

6. Feedback

In the sixth stage, all the information gathered through pretesting, other research, and evaluation is analyzed in preparation for a new cycle of program messages and materials. The data should be examined carefully to uncover problems and to identify weaknesses that can be remedied when planning future communication programs for youth about alcohol and other drugs.

For example, the results of an evaluation of a poster intended to increase awareness of peer pressure might indicate that the target audience did not think the information was realistic. The next cycle of messages might include a pamphlet to address this issue in depth.

Keeping in touch with organizations with similar concerns and activities will provide additional insights into effective methods for reaching teens with information about alcohol and other drugs.

In conclusion, certain principles should be followed consistently in developing a communications campaign, even when resources are limited:

- Devote time and effort to developing a comprehensive campaign plan.
- Keep abreast of the research literature on the target population and the use of mass media in health communication to provide direction for new approaches.
- Understand the information needs and perceptions of youth and obtain feedback from them.

- Establish good working relationships with concerned citizens in the community, with the local media, and with other groups to improve the chance for success.

Note: If you are interested in receiving technical assistance for developing messages and materials to prevent alcohol and other drug use among young teens, write or call The OSAP Communications Team, University Research Corporation, 7200 Wisconsin Avenue, Suite 500, Bethesda, MD 20814, telephone (301) 951-3277.

OSAP

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